FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

RAY FLOYD ENTERPRISES, INC.

(3)

FILED Apr 28 1998 8:00am Secretary of State



rancipal riace	OI BUSINUSS	Mailing Address		
24 INDIAN CREEK ISLAND MIAMI BEACH FL 33154		24 INDIAN CREEK ISLAND MIAMI BEACH FL 33154		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 06/05/1992
2. Principal Pi	oyal falm way	2a. Maiting Address	. _	4. FEI Number Applied For
ภ 23 เห	oyal telm way	26 231 Royal (alm wou	√ 65-0341238 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22 100		27 100		Fee Required
City & State	ibeach th	28 Falm Bea	ch Fi	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
a 20 33349	Country 25 USA	33480	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
14 00	9. Name and Address of Current		<u>~</u>	10. Name and Address of New Registered Agent
FLOYD, MARIA 81 Name				
OA IMPIANI ODEEV ICI AND				
MIAMI BEACH FL 33154 B2 Street Address (P.O. Box Number is Not Acceptable) Suite (D) Sireet Address (P.O. Box Number is Not Acceptable)				
			64 City	In Beach FL 85 Zip Code 27469
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos.				
· ·				
SIGNATURE Signature, typied or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND	······	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.5 TITLE	Change Addition
NAME	FLOYD, RAYMOND		1.2 NAME	Floyd, Raymond 231 Royalfalm Way, #100
STREET ADDRESS	24 INDIAN CREEK ISLAND		1.3 STREET ADDRESS	531 KOASILSIW MAA'
CRY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP	Palm Beach, Fl 33480
TITLE	ST	☐ DELETE	2.1 TITLE	Change Addition
NAME	FLOYD, MARIA		2.2 NAME	Floyd, Maria
STREET ADDRESS	24 INDIAN CREEK ISLAND		2.3 STREET ADDRESS	231 Royal Palm Way, #100
CITY-ST-ZIP	MIAMI BEACH FL		2. 4 CITY - ST - ZIP	Palm Beach, FL 33480
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-S1-ZIP	
TITLE		DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 City - St - ZiP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 C(TY - ST - Z(P	
TITLE		☐ DELE te	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP	-		6.4 CITY - ST - ZIP	
14. I hereby c	ertify that the information supplied will	this filing does not qualify for	the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.				